2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2009
Secretary of State

DOCUMENT# N08000008805

Entity Name: FRIENDS OF CHINSEGUT HILL, INC.

Current Principal Place of Business:

10299 S PALOMINO TRAIL
FLORAL CITY, FL 34436

New Principal Place of Business:

Current Mailing Address:

10299 S PALOMINO TRAIL
FLORAL CITY, FL 34436

New Mailing Address:

FEI Number: 26-3459475 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ANDERBERG, CHRISTIE
24268 LAKE LINDSEY ROAD
BROOKSVILLE, FL 34601 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title:	DP	( ) Delete
Name:	HUGHES, KATE	
Address:	10299 S PALOMINO TRAIL	
City-St-Zip:	FLORAL CITY, FL 34436	
Title:	DVP	( ) Delete
Name:	RHODES, DENNIS	
Address:	14403 MISSOURI SKYLARK RD	
City-St-Zip:	WEEKI WACHEE, FL 34614	
Title:	DT	( ) Delete
Name:	ERLER-BRADSHAW, MYRNA	
Address:	PO BOX 1988	
City-St-Zip:	BUSHNELL, FL 33513	
Title:	DS	( ) Delete
Name:	ANDERBERG, CHRISTIE	
Address:	24268 LAKE LINDSEY ROAD	
City-St-Zip:	BROOKSVILLE, FL 34601	
Title:	D	( ) Delete
Name:	PENKAVA, BILL	
Address:	4458 HICKORY HAMMOCK DRIVE	
City-St-Zip:	RIDGE MANOR, FL 33523	
Title:	D	( ) Delete
Name:	FOX, PATTI	
Address:	26095 COMANCHE ST	
City-St-Zip:	BROOKSVILLE, FL 34601	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MYRNA ERLER-BRADSHAW DT 04/17/2009

Electronic Signature of Signing Officer or Director — Date